DECLARATION OF INVENTORSHIP AND POWER OF ATTORNEY

FOR PATENT APPLICATION

			Docket No.
As a below n	amed inventor, I hereby decl	lare that:	
My residence	, post office address and citis	zenship are as stated belo	w next to my name.
	ONNECTOR CAPABLE (is listed below) or an original, first and joint inventor med and for which a patent is sought on the invention COAXIAL CABLE WITHOUT USING TOO
(check one)	is attached hereto.		
	was filed on		
	and was amended on		(if applicable).
I hereby state as amended by	that I have reviewed and und y any amendment referred to	derstand the contents of the	ne above identified specification, including the claims,
I acknowledge § 1.56.	the duty to disclose to the	Office all information whi	ich is material to Patentability as defined in 37 CFR
	foreign priority benefits unde id have also identified below the application on which pri	any luleion application to	reign application(s) for patent or inventor's certificate or patent or inventor's certificate having a filing date
Prior Foreign 1	Application(s)		
APPLI	ICATION NUMBER	COUNTRY	FILING DATE (Day/Month/Year)
rovided by the	e first paragraph of 35 USC	§ 112, I acknowledge the	application (s) listed below and insofar as the subject the prior United States application in the manner duty to disclose to the Office information which is ween the filing date of the prior application and the
<u>APPLI</u>	CATION NUMBER	FILING DATE	STATUS

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

(Day/Month/Year)

(Patented, Pending, Abandoned)

Bruce H. Troxell, Reg. No. 26,592

f3038

Address all telephone calls to

Bruce H. Troxell (703) 575-2711

Address all correspondence to:

Bruce H. Troxell

5205 Leesburg Pike, Suite 1404

Falls Church, Virginia 22041
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	rst inventor Chen-	nung none	
Inventor's signature <u>C</u>	Hon-Hung HUNG	Date OCTOBER 20, 2003	
		CitizenshipTAIWAN,R.O.C.	
Post Office Address	NO.26,LANE 88	FU-SHING RD., CHUNG-LE TSUN,	
	MING-SHIUNG H	SIANG, CHIA-YI HSIEN, TAIWAN, R.O.C.	
	•		
Full name of second jo	int inventor, if any		
Second Inventor's signa	ature	Date	
Residence		Citizenship	
Post Office Address			
F. II.			
Full name of third joint	inventor, if any		
I hard Inventor's signatu	ıre	Date	
Residence		Citizenship	
Post Office Address			
Full name of fourth joir		•	
Fourth Inventor's signet	nt inventor, if any		
Fourth Inventor's signat	ture	Date	
Fourth Inventor's signat Residence	ture	Date Citizenship	
Fourth Inventor's signat Residence	ture	Date	
Fourth Inventor's signat Residence	ture	Date Citizenship	
Fourth Inventor's signat Residence Post Office Address	ture	DateCitizenship	
Fourth Inventor's signat Residence Post Office Address Full name of fifth joint i	inventor, if any	DateCitizenship	
Fourth Inventor's signat Residence Post Office Address Full name of fifth joint i Fifth Inventor's signatur	inventor, if any	DateCitizenship	
Fourth Inventor's signat Residence Post Office Address Full name of fifth joint i Fifth Inventor's signatur Residence	inventor, if any	DateCitizenship	
Fourth Inventor's signat Residence Post Office Address Full name of fifth joint i Fifth Inventor's signatur Residence Post Office Address	inventor, if any	Date	
Fourth Inventor's signat Residence Post Office Address Full name of fifth joint i Fifth Inventor's signatur Residence Post Office Address Full name of sixth joint i	inventor, if anyinventor, if anyinven	Date	
Fourth Inventor's signat Residence Post Office Address Full name of fifth joint i Fifth Inventor's signatur Residence Post Office Address Full name of sixth joint i Sixth Inventor's signature	inventor, if anyinventor, if any	Date	
Fourth Inventor's signat Residence Post Office Address Full name of fifth joint i Fifth Inventor's signatur Residence Post Office Address Full name of sixth joint i Sixth Inventor's signature	inventor, if anyinventor, if anyinventor, if anye_	Date	

f3038